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		ock I for any change of address)	Fe pa	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
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NEW YORK, NY	10001-7708			B VII	LANI	(Depositor's name)	
					J. Illan	(Signature)	
				EFS 7/2	.9/69	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/580,590				de visitation de	06354/LH	5451	
ITLE OF INVENTION: INFORMATION INPUTTING TOOL, STORAGE DEVICE, INFORMATION INPUTTING DEVICE, AND INFORMATION ROCESSING EQUIPMENT							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DUI	DATE DUE	
nonprovisional	YES	\$755	\$300	\$0	\$1055	08/04/2009	
EXAMI	NER	ART UNIT	CLASS-SUBCLASS				
LEWIS, DA	VID LEE	2629	345-156000				
	ndence address (or Char 122) attached. ation (or "Fee Address' or more recent) attach D RESIDENCE DATA	nge of Correspondence  Indication form ed. Use of a Customer	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)  data will appear on the patent. If an assignee is identified below, the document has been filed for T a substitute for filing an assignment.				
(B) RESIDENCE: (CITY and STATE OR COUNTRY)  case check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government  a. The following fee(s) are submitted:  Ab. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  Size Fee  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 06-1378 (enclose an extra copy of this form).							
Change in Entity Statu			h Applicant is no to	agor gloiming SMA	LL ENTITY status. See 37 C	PED 1.27(a)(3)	
OTE: The Issue Fee and	Publication Fee (if requ		d from anyone other than			he assignee or other party in	
Authorized Signature	The state of the s	7	Date 7/29/09				
Typed or printed nameLeonard Holtz							
iexandria, virginia 22513	1-1430.			retain a benefit by to stimated to take 12 in vidual case. Any co- cer, U.S. Patent and O THIS ADDRESS	he public which is to file (an minutes to complete, includi- mments on the amount of ti Trademark Office, U.S. Dep 8. SEND TO: Commissioner displays a valid OMB contro	d by the USPTO to process) ng gathering, preparing, and me you require to complete sartment of Commerce, P.O. for Patents, P.O. Box 1450, I number.	